

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	111		11-27-01
O.I.P.E. CLASSIFIER		3:	12/4/01
FORMALITY REVIEW	4.7.	1117	12/05/01
RESPONSE FORMALITY REVIEW	JL	1019	02-28-02
22	JL	1027	04/30/02

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	1	1	10-7-03
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	0	0	0
8	✓	✓	✓
9	✓	✓	✓
10	✓	✓	✓
11	✓	✓	✓
12	0	0	0
13	0	0	0
14	0	✓	✓
15	0	0	0
16	✓	✓	✓
17	0	0	0
18	✓	✓	✓
19	0	0	0
20	0	0	0
21	✓	✓	✓
22	0	0	0
23	✓	✓	✓
24	0	0	0
25	✓		
26	0	✓	✓
27	✓		
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If more than 150 claims or 10 actions  
staple additional sheet here

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